401 S. Clinton Street, Chicago, Illinois
201 S. Grand Avenue East, Springfield, Illinois

Committee Members Present
Kathy Chan, Cook County Health & Hospitals System
Margaret Stapleton, Shriver Center
John Jansa, WKG Advisory
Sherie Arriazola, TASC
Erin Weir, Age Options
Nadeen Israel, EverThrive Illinois
Hardy Ware, East Side Health District (by phone)
Brittany Ward, Primo Center for WC
Ramon Gardenhire, AFC
Lauren Angeles, Alivio Medical Center (for Sue Vega)

HFS Staff
Lauren Polite
John Spears
Bridget Larson
Gabriela Moroney
Bridgett Stone
Mariah Balaban
John Hoffman
Ben Noble
Arvind K Goyal
Veronica Archundia

Committee Members Absent
Sergio Obregon, CPS
Connie Schiele, HSTP

DHS Staff
Patricia Reed

Interested Parties
Deb Matthews, DSCC
Kelly Carter, IPHCA
Rick Cornell, Health Alliance
Kenneth E. Ryan, Illinois State Medical Society
Enrique Salgado, Harmony
Helena Lefkow, MCHC
Sandy De Leon, Ounce of Prevention Fund
Daad Sharfi, Primo Center
Alison Stevens, LAF
Sonia Robins, Molina HC
Anna Carvalho, LaRabida
Franchella Holland, Advocate Health
Kathryn Shelton, LAF
Ken Ryan, ISMS
Mike Lafond, Abbvie
Kathy Waligora, EverThrive Illinois
Lindsey Artola, IlliniCare
Luvia Quiñones, ICIRR
Karen Brach, BCBSIL
Jessie Beebe, AFC
Andrew M. Weaver, Land of Lincoln Legal Assistance Foundation (by phone)
Dan Rabbitt, Heartland Alliance (by phone)
Lynne Warszalek, Stickney Health Department (by phone)
Anita Stewart, BCBSIL (by phone)
Regina Porter, Next Level Health (by phone)
1. **Introductions**
   Kathy Chan, from CCHHS, chaired the meeting. Attendees in Chicago and Springfield introduced themselves.

2. **Review of Minutes**
   Margaret Stapleton made a motion to approve the minutes from the meeting held on April 9th and it was seconded by Erin Weir. The minutes were approved by a vote of nine in favor, one abstention, and zero opposed.

3. **Review of the Subcommittee Charge**
   Chairperson Kathy Chan led the discussion over the revised version of the subcommittee’s charge: [http://www2.illinois.gov/hfs/PublicInvolvement/BoardsandCommissions/MAC/publiced/Pages/default.aspx](http://www2.illinois.gov/hfs/PublicInvolvement/BoardsandCommissions/MAC/publiced/Pages/default.aspx)
   She indicated that the only change made to last year’s version is that the revised charge no longer includes the name of each specific program that the department administers, as had been noted in the previous version. This suggestion was made based upon a recommendation of the full Medicaid Advisory Committee (MAC). The intention is to avoid updating the changing list of programs every year.

   A comment, and a suggestion, was made by a committee attendee, who noted that the Public Education Subcommittee primarily focuses on issues concerning beneficiaries; however, in her opinion, there may be a need to offer additional support in terms of educating providers. Robust discussion among committee members and other attendees participating resulted in a consensus acknowledging that, although the focus of this committee has been on beneficiaries and the general public, the subcommittee has also been sufficiently flexible in addressing provider issues. It was concluded that the committee should continue operating openly and flexibly. Kathy Chan made a motion to bring a recommendation to the full Medicaid Advisory Committee that the revised charge should remain as written. This motion was unanimously supported.

   Mariah Balaban reported that the draft of the “Guide for Applicants & Clients Receiving Health Coverage from HFS” is in its final stages of completion. She thanked the committee members for their contributions in the development of the guide. Mariah Balaban indicated that today would be the conclusion of her internship with HFS; consequently, she requested that any final recommendations should be sent before the closing of business to her attention at: [Mariah.Balaban@illinois.gov](mailto:Mariah.Balaban@illinois.gov). She noted that future recommendations or revisions should be directed to [Lauren.Polite@illinois.gov](mailto:Lauren.Polite@illinois.gov). Committee members expressed their appreciation to Mariah for her enthusiasm, dedication, hard work, and a job well done in the completion of this project.

5. **ACA Health Care Reform Updates**
   **ABE Usability**
   Lauren Polite provided an update about the developments of usability efforts that include the newly redesigned ABE homepage, which now appears to be more clear, logical, and professional. Another important enhancement involves the redesign of the household member navigation page of the ABE application with the addition of clear icons highlighting which person’s information is being filled out, and giving an “inactive” indication to household members for whom no data has been entered. This is expected to improve the user experience and increase data entry automation.

   Lauren indicated that, prompted by reports from assisters and navigators, the Summary Household section was redesigned. Changes include: grouping information per household member instead of listing questions separately. The newly redesigned summary page takes one snap shot of each
person’s household, adding font and color enhancements and arranging information in boxes which are properly labeled to clearly group information by household member.

Ms. Polite noted that another exciting project concerning ABE usability has been progress with developing the ABE mobil app, which will allow the ability to upload documents through a mobile device, as well as the ability to check benefits status, change passwords, and view Frequently Asked Questions. It is expected that the ABE mobil app will be available in the first quarter of 2016. Committee members will be informed of any future developments, and their feedback will be solicited when appropriate.

Application Processing
Lauren Polite provided a brief update regarding the application processing status, indicating that the state has been receiving an average 7000 to 8000 applications per week. The FFM recently sent over 4,000 applications that previously had not been forwarded to Illinois for determination of eligibility. She added that state employees are working diligently to make sure that all applications are processed. In addition, the date when the FFM applications were initially submitted will be honored.

Nadeen Israel asked if the state plans to revise the notices that are being sent to individuals who do not qualify for Medicaid which currently direct them to apply through the Marketplace. Lauren Polite indicated that, at this time, no immediate change has been programmed, because all efforts are being directed toward IES Phase Two. However, it is expected that some notices will be revised this fall, when the client web portal is expected to be launched, including the “Manage My Case” function, which will use client notices and make them available online.

Integrated Eligibility System (IES) Phase Two Update
Lauren Polite provided the subcommittee with a brief presentation concerning the efforts that HFS has been making in preparation for IES Phase Two. The enhancements which are expected to be launched in September, include accessing “Manage My Case” and allowing third party providers (such as, MPE, AKAAs, hospitals, and other adult members on the case) to have access to limited case information.

Other functions concerning “Manage My Case” include: “Renew My Case,” “Report My Changes,” and “Check My Benefits.” Lauren indicated that HFS is currently working on the development of a communication plan in preparation for the launching of IES (Phase Two). It is expected that extensive training will be provided at the end of the summer, which will include, among other topics, how to apply for Medicaid, the “Manage My Case” function, and the “Appeals Management Portal.” Since there was very positive feedback regarding the guides made available during Phase One, it is expected that, to support the smooth launching of phase two, guides will be made available and published on the HFS website. HFS will continue a partnership with EverThrive Illinois, which is expected to host some webinars.

6. HFS Website Update
John Hoffman stated that HFS is discussing the redevelopment and redesign of 15 of its websites. The intent of this review is to develop a professional, well organized, clean look, using simple language. In order to conduct this project, HFS is seeking suggestions, comments, and recommendations from providers, partners, clients, and other interested parties. HFS has developed a survey, which contains eight open-ended questions intended to assess the current function of its websites. Anyone interested in obtaining and discussing further details may contact john.hoffman@illinois.gov. The survey is available at https://www.surveymonkey.com/r/?sm=X6Nop6wmpDq3bDv6vyTXgw%3d%3d
Committee members and other attendees participating in the discussion shared recommendations, which included: adding a segment concerning “Facts about Medicaid,” featuring successful stories of individual recipients, posting a list of the most favorite HFS websites, as well as adding a list of partners and their respective links sites.

7. **Care Coordination Update**

Bridget Larson presented enrollment information, first noting that, in June, 1.9 million FHP and ACA adults enrolled in managed care health plans across the state (MCO, MCCN, ACE or CCE.) Among these, 53% of the enrollments are the result of auto-assignment, and 47% are the result of choice. For the clients who were auto-assigned, 57% were the result of maintaining existing provider relationships, and 29% were the result of geomapping. For those who made a choice, 69% did so through the Client Enrollment Services call center, and 31% made a choice by means of the online enrollment portal.

Bridget also noted that the call center is currently receiving from 3,000 to 6,000 calls per day and has experienced a good turnaround, as well as tracking minimal periods of extended wait times. The average wait time is typically less than a one minute. Mondays and Wednesdays still have high volume call periods between noon and 5:00 pm. However, there has been a 40% drop in call volume on Fridays and Saturdays.

HFS staff will follow-up with the committee to provide answers to several concerns regarding statistics on the number of people who switched plans during their 90-day period. HFS will provide an example of the open enrollment letter that is being sent to clients, as well as several operational questions about ACE/CCE and their partnerships with MCOs. See the first attachment for answers to the questions raised.

8. **Illinois Medicaid Redetermination Project (IMRP) Enhanced Eligibility Verification (EEV) Update**

John Spears indicated that HFS has posted a report concerning the IMRP undertaken by HFS and DHS, pursuant to the SMART Act (http://www2.illinois.gov/hfs/SiteCollectionDocuments/IMRPQtrlyReport12015.pdf). Since the beginning of 2013, IMRP has reviewed almost 1.1M cases. There are about 65,000 cases reviewed for redetermination each month. By the end of the month, 37,000 Family Health Plan redeterminations will be sent. As a result, the state is getting closer to being caught up with all the redeterminations before IES Phase II is expected to start. At the end of the month, there will be a one-time mailing to ACA Adults with SNAP benefits who have turned age 65 or begun receiving Medicare. In addition, in the last three months, 775 individuals were removed, as it was discovered that they were deceased.

Mr. Spears showed the committee members a revised envelope that will be used to send clients their redetermination forms. New language was added to the outer envelope which reads, “Illinois Redetermination Project – Important information about your coverage.” This message is in English, Spanish, Polish, Russian, and Cantonese. On the back of the renewal form, a message states: “Important! This material contains information about your benefits. If you need help translating it, call 1-855-458-4945 and press 1. This statement is translated into 18 different languages and is intended to highlight the importance of the notice, as well as to encourage individuals to contact the IMRP hotline, which will connect them with a translator hotline to help address any questions or concerns. Please see attachments two and three. Chairperson Kathy Chan thanked the Department for taking the committee’s suggestions.

In addition, John Spears noted that HFS has made a list available to long term care and support facilities of individuals living in these facilities who are due for a redetermination. He remarked that,
in the upcoming weeks, a list of individuals who are due for redeterminations will also be provided to the MCOs. HFS will be contacting all the MCOs to let them know that this information is going to be available and, if they wish, to encourage clients to complete their redeterminations to avoid unnecessary cancelations due to a lack of response.

9. **Budget Report**
   Nothing was reported in this subject.

10. **Open Discussion and Announcements**
    Chair person Kathy Chan encouraged committee members to send additional topics to be included in the next agenda. For now, it was agreed that today’s agenda items should be again included for the next meeting.

11. **Adjourn**
    The meeting was adjourned at 12:08 p.m. The next meeting is scheduled for August 13, 2015, between 10:00 a.m. and 12:00 p.m.
Children's Enrollment

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### Enrolled Children by Month #000s

HFS June 2015